C
IlGuDa
1961/62

REPORT

of

THE UNIVERSITY OF ILLINOIS COMMITTEE ON

ACCIDENT COMPENSATION

for period

JULY 1, 1961 THROUGH JUNE 30, 1962

THE LIBRARY OF THE
FEB - 7 1963
UNIVERSITY OF ILLINOIS

1961 - 1962

Digitized by the Internet Archive
in 2013

http://archive.org/details/accidentcasescon196162univ

University of Illinois

ACCIDENT CASES CONSIDERED BY

THE COMMITTEE ON ACCIDENT COMPENSATION

THE COMMITTEE ON ACCIDENT COMPENSATION

James J. Costello, Chairman

Professor G. W. Harper

Director A. C. Marks

Mr. C. C. DeLong

Mr. Max N. Pike, Secretary

Dr. M. D. Kinzie
Associate Director of Health Services-Advisor

Mr. John Morris-Advisor

Mr. James Harmon-Advisor

SUB-COMMITTEE

Dr. M. D. Kinzie

Professor G. W. Harper

Mr. R. E. Hartz

Mr. James Harmon

Mr. G. McGregor

Mr. John Morris

Mr. Max N. Pike, Secretary

1961-1962

TABLE OF CONTENTS

Schedule 1 - Employee accident cases considered by the Committee on Accident Compensation, July 1, 1961 through June 30, 1962.[1]

Schedule 2 - Common Law Claims (Personal Injury) considered by the Committee on Accident Compensation, July 1, 1961 through June 30, 1962.

Schedule 3 - Cases where payments of hospital or medical statements were made on the basis of referral.

Schedule 4 - Analysis of compensable cases.

Schedule 5 - Comparative summary of accident cases by department, number and total cost.

Schedule 6 - Cases considered by the Industrial Commission of Illinois and disposition thereof.

Schedule 7 - Summary in relation to payroll.

[1]The amounts are the payments made in the period of July 1, 1961 through June 30, 1962.

Comp. Time Lost indicates the amount paid for the time lost under the provisions of the Illinois Workmen's Compensation Act, or the Illinois Occupational Diseases Act.

Medical indicates the amount paid for medical treatment under the provisions of the before-mentioned Acts.

P. Disab. Final Settlement indicates the amount paid in settlement of the case under the provisions of the before-mentioned Acts.

O.D. or Work Comp. Costs indicates the total amount paid under the provisions of the before-mentioned Acts.

* Indicates the case has been reported in the previous year or years.

# Indicates the case is still pending.

Report prepared by Max N. Pike
Supervisor of Accident Compensation
and Alfreda Mitchell, Clerk-Steno III

SCHEDULE 1

ACCIDENT CASES CONSIDERED BY THE COMMITTEE ON ACCIDENT

COMPENSATION JULY 1, 1961 THROUGH JUNE 30, 1962

CHAMPAIGN-URBANA

UNIVERSITY OF ILLINOIS COMMITTEE ON ACCIDENT COMPENSATION
July 1, 1961 to June 30, 1962

Champaign-Urbana
Administration and General

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Business Office								
4852	(1)	7-27-61	12	41 07	155 50	0	0	196 57
Total - Business Office: (1 case)								
			(12)	(41 07)	(155 50)	(0)	(0)	(196 57)
McKinley Hospital Operations								
4941	(3)	9-25-61	3	0	35 00	0	0	35 00
4953	(2)	8-15-61	0	0	5 21	0	0	5 21
Total - McKinley Hospital Operations: (2 cases)								
			(3)	(0)	(40 21)	(0)	(0)	(40 21)
Nonacademic Personnel								
5037	(1)	1-8-62	0	0	20 00	0	0	20 00
Total - Nonacademic Personnel: (1 case)								
			(0)	(0)	(20 00)	(0)	(0)	(20 00)
Statistical Service								
5110	(1)	2-22-62	0	0	25 00	0	0	25 00
Total - Statistical Service: (1 case)								
			(0)	(0)	(25 00)	(0)	(0)	(25 00)

* Case reported previously. # Case pending.

Champaign-Urbana
Administration and General (continued)

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Stenographic Bureau								
5109	(3)#	2-28-62	2	0	4 91	0	0	4 91
Total - Stenographic Bureau: (1 case)								
			(2)	(0)	(4 91)	(0)	(0)	(4 91)
Vice-President and Provost's Office								
4743	(2)*	6-13-60	0	0	0	243 18	0	243 18
Total - Vice-President and Provost's Office: (1 case)								
			(0)	(0)	(0)	(243 18)	(0)	(243 18)
TOTAL - ADMINISTRATION AND GENERAL: (7 cases)			(17)	(41 07)	(245 62)	(243 18)	(0)	(529 87)

* Case reported previously. # Case pending.

Champaign-Urbana
Liberal Arts and Sciences

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
LAS Administration								
5038	(1)	12-4-61	0	0	7 20	0	0	7 20
Total - LAS Administration: (1 case)			(0)	(0)	(7 20)	(0)	(0)	(7 20)
Botany								
4981	(2)	11-15-61	0	0	97 00	0	0	97 00
Total - Botany: (1 case)			(0)	(0)	(97 00)	(0)	(0)	(97 00)
Chemistry and Chemical Engineering								
4652	(2)*	11-18-60	0	0	0	1175 00	0	1175 00
4715	(2)*	3-2-61	0	0	30 00	0	0	30 00
4778	(1)*#	5-5-61	88	565 72	502 40	0	0	1068 12
4819	(1)	6-16-61	0	0	5 05	0	0	5 05
4848	(2)	7-28-61	0	0	13 50	0	0	13 50
5069	(1)#	2-19-62	6	0	10 00	0	0	10 00
5082	(2)	2-23-62	0	0	27 10	0	0	27 10
5106	(11)	1-30-62	0	0	33 00	0	0	33 00
Total - Chemistry and Chemical Engineering: (8 cases)			(94)	(565 72)	(621 05)	(1175 00)	(0)	(2361 77)

* Case reported previously. # Case pending.

Champaign-Urbana
Liberal Arts and Sciences (continued)

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Geology								
5100	(2)	3-9-62	0	0	10 00	0	0	10 00
Total - Geology:	(1 case)		(0)	(0)	(10 00)	(0)	(0)	(10 00)
Physiology								
5045	(3)	1-8-62	0	0	3 00	0	0	3 00
Total - Physiology:	(1 case)		(0)	(0)	(3 00)	(0)	(0)	(3 00)
Speech and Theatre								
5071	(4)	2-17-62	0	0	2 52	0	0	2 52
Total - Speech and Theatre:	(1 case)		(0)	(0)	(2 52)	(0)	(0)	(2 52)
TOTAL - LIBERAL ARTS AND SCIENCES:	(13 cases)		(94)	(565 72)	(740 77)	(1175 00)	(0)	(2481 49)

* Case reported previously. # Case pending.

Champaign-Urbana
Agriculture

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Agricultural Economics								
5035	(1)#	12-19-61	3	0	20 00	0	0	20 00
5137	(1)	3-31-62	0	0	3 00	0	0	3 00
Total - Agricultural Economics:	(2 cases)		(3)	(0)	(23 00)	(0)	(0)	(23 00)
Agricultural Engineering								
4721	(1&2)*	3-9-61	0	0	139 00	200 00	0	339 00
4747	(1)*	4-8-61	0	0	400 00	0	0	400 00
4908	(1)	9-16-61	0	0	18 00	0	0	18 00
5015	(1)	10-23-61	0	0	3 50	0	0	3 50
5070	(2)	1-10&11-62	0	0	10 15	0	0	10 15
Total - Agricultural Engineering:	(5 cases)		(0)	(0)	(570 65)	(200 00)	(0)	(770 65)
Agricultural Entomology								
5127	(3)#	4-4-62	57	447 86	1879 75	0	0	2327 61
Total - Agricultural Entomology:	(1 case)		(57)	(447 86)	(1879 75)	(0)	(0)	(2327 61)
Agricultural Extension								
4835	(3)	6-19-61	0	0	4 00	0	0	4 00

* Case reported previously. # Case pending.

Champaign-Urbana
Agriculture (continued)

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Agricultural Extension (continued)								
4858	(3)	7-9-61	0	0	3 00	0	0	3 00
4865	(4)	6-18-61	0	0	3 00	0	0	3 00
Total - Agricultural Extension:		(3 cases)	(0)	(0)	(10 00)	(0)	(0)	(10 00)
Agronomy								
4641	(2)*	12-9-60	0	0	0	1008 00	0	1008 00
4822	(1)	6-6-61	0	0	15 00	0	0	15 00
4855	(2)#	8-9-61	144	668 57	556 95	0	0	1225 52
4867	(1)	8-18-61	0	0	12 00	0	0	12 00
4882	(1)	7-25-61	0	0	5 00	0	0	5 00
4912	(5)	5-16-61	0	0	6 00	0	0	6 00
4936	(2)#	9-1-61	0	0	297 91	0	0	297 91
4959	(1)	10-31-61	0	0	15 50	0	0	15 50
Total - Agronomy:		(8 cases)	(144)	(668 57)	(908 36)	(1008 00)	(0)	(2584 93)
Animal Science								
4589	(1&5)*	10-7-60	0	0	6 00	0	0	6 00

* Case reported previously. # Case pending.

Champaign-Urbana
Agriculture (continued)

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Animal Science (continued)								
4722	(9)*	12-28-60	47	302 14	511 50	0	0	813 64
4869	(1)	8-14-61	16	59 14	11 75	0	0	70 89
4874	(2)	8-30-61	5	0	115 75	0	0	115 75
4911	(1)	9-3-61	0	0	6 30	0	0	6 30
4913	(6)	9-16-61	0	0	5 00	0	0	5 00
5029	(1)	1-10-62	0	0	19 95	0	0	19 95
5085	(2)#	3-1-62	9	13 71	206 55	0	0	220 26
5138	(5)	3-28-62	0	0	15 00	0	0	15 00
Total - Animal Science:	(9 cases)		(77)	(374 99)	(897 80)	(0)	(0)	(1272 79)
Dairy Science								
4843	(2)	6-17-61	0	0	13 00	0	0	13 00
4889	(4)	9-11-61	0	0	5 00	0	0	5 00
4897	(1)	9-17-61	1	0	43 60	0	0	43 60
5052	(2)#	1-29-62	0	0	28 00	0	0	28 00
5095	(2)	3-6-62	0	0	1 82	0	0	1 82
Total - Dairy Science:	(5 cases)		(1)	(0)	(91 42)	(0)	(0)	(91 42)

* Case reported previously. #Case pending.

Champaign-Urbana
Agriculture (continued)

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Dixon Springs Experiment Station								
3428	(2)*	6-20-56	0	0	0	(I) 410 82	0	410 82
4922	(1)	10-6-61	0	0	13 00	0	0	13 00
5025	(2)	1-15-62	3	0	15 00	0	0	15 00
5049	(2)	1-13-62	0	0	24 00	0	0	24 00
5050	(5)	1-18-62	0	0	5 00	0	0	5 00
5148	(4)	4-10-62	5	0	26 00	0	0	26 00
5151	(2)#	4-23-62	6	0	19 00	0	0	19 00
Total - Dixon Springs Experiment Station:	(7 cases)		(14)	(0)	(102 00)	(410 82)	(0)	(512 82)
Forestry								
4581	(1&5)*	10-6-60	0	0	15 00	1000 00	0	1015 00
5081	(5)	3-1-62	0	0	3 95	0	0	3 95
Total - Forestry:	(2 cases)		(0)	(0)	(18 95)	(1000 00)	(0)	(1018 95)
Home Economics								
5105	(5)#	2-19-62	0	0	17 50	0	0	17 50
Total - Home Economics:	(1 case)		(0)	(0)	(17 50)	(0)	(0)	(17 50)

* Case reported previously. # Case pending.

(I) Installment Payments made during fiscal year on Final Settlement.

Champaign-Urbana
Agriculture (continued)

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Horticulture								
4591	(2)*	10-20-60	0	0	43 48	0	0	43 48
4815	(1)	6-5-61	1	0	5 40	0	0	5 40
4849	(11)	7-24-61	0	0	7 88	0	0	7 88
5024	(2)	12-27-61	0	0	74 70	0	0	74 70
Total - Horticulture:	(4 cases)		(1)	(0)	(131 46)	(0)	(0)	(131 46)
Robert Allerton Park								
4927	(2)	9-13-61	0	0	3 00	0	0	3 00
4993	(4)	9-7-61	0	0	10 00	0	0	10 00
5121	(5)	3-20-62	0	0	13 00	0	0	13 00
Total - Robert Allerton Park:	(3 cases)		(0)	(0)	(26 00)	(0)	(0)	(26 00)
TOTAL - AGRICULTURE:	(50 cases)		(297)	(1491 42)	(4676 89)	(2618 82)	(0)	(8787 13)

* Case reported previously. # Case pending.

Champaign-Urbana
Engineering

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Civil Engineering								
4623	(1)*	11-18-60	0	0	51 00	1057 50	0	1108 50
4767	(1)	3-20-61	20	83 57	0	0	0	83 57
4806	(2)	5-16-61	19	77 14	0	0	0	77 14
4986	(3)	12-6-61	1	0	16 00	0	0	16 00
5039	(1)	12-23-61	0	0	3 00	0	0	3 00
5145	(2)#	4-10-62	5	0	31 00	0	0	31 00
Total - Civil Engineering: (6 cases)			(45)	(160 71)	(101 00)	(1057 50)	(0)	(1319 21)
Coordinated Science Laboratory								
4799	(1)*	6-5-61	0	0	0	500 00	0	500 00
5133	(1)#	4-6-62	0	0	13 50	0	0	13 50
Total - Coordinated Science Laboratory: (2 cases)			(0)	(0)	(13 50)	(500 00)	(0)	(513 50)
Electrical Engineering								
4895	(5)	6-9-61	0	0	7 00	0	0	7 00
4924	(1)	9-11-61	0	0	26 00	0	0	26 00

* Case reported previously. # Case pending.

Champaign-Urbana
Engineering (continued)

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Electrical Engineering (continued)								
4973	(12)#	10-9-61	0	0	5 00	0	0	5 00
5028	(2)	10-23-61	0	0	10 80	0	0	10 80
5053	(2)	1-10-62	0	0	4 60	0	0	4 60
5098	(2)	3-1-62	0	0	21 00	0	0	21 00
5102	(2)	3-5-62	6	0	66 00	0	0	66 00
Total - Electrical Engineering:			(7 cases)					
			(6)	(0)	(140 40)	(0)	(0)	(140 40)
Mechanical Engineering								
5076	(2)	2-20-62	1	0	3 00	0	0	3 00
Total - Mechanical Engineering:			(1 case)					
			(1)	(0)	(3 00)	(0)	(0)	(3 00)
Mining, Metallurgy and Petroleum Engineering								
4914	(1)	7-29-61	0	0	8 25	0	0	8 25
Total - Mining, Metallurgy and Petroleum Engineering:			(1 case)					
			(0)	(0)	(8 25)	(0)	(0)	(8 25)

* Case reported previously. # Case pending.

Champaign-Urbana
Engineering (continued)

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Nuclear Engineering								
5017	(1)	2-15-61	0	0	5 50	0	0	5 50
Total - Nuclear Engineering:	(1 case)		(0)	(0)	(5 50)	(0)	(0)	(5 50)
Physics								
4593	(12)*#	10-28-60	0	0	0	(I) 2659 30	0	2659 30
4647	(12)*#	1-2-61	186	677 58	3663 85	0	0	4341 43
4748	(1)	4-12-61	0	0	48 15	0	0	48 15
4820	(2)	5-14-61	0	0	15 00	0	0	15 00
4823	(2)	5-9-61	0	0	25 00	0	0	25 00
4847	(3)	7-25-61	0	0	21 55	0	0	21 55
4989	(2)	11-7-61	0	0	6 00	0	0	6 00
5027	(9)	1-4-62	37	322 43	500 55	0	0	822 98
5058	(3&5)#	2-3-62	25	171 43	1223 71	(I) 630 85	116 88	2142 87
5059	(3)	2-3-62	0	0	6 50	0	0	6 50
5066	(2)#	12-27-61	0	0	50 35	0	0	50 35
5092	(1)#	3-17-62	0	0	6 00	0	0	6 00

* Case reported previously. # Case pending.

(I) Installment Payments made during fiscal year on Final Settlement.

Champaign-Urbana
Engineering (continued)

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Physics (continued)								
5123	(1)	3-28-62	0	0	8 00	0	0	8 00
5169	(3)	5-3-62	0	0	14 00	0	0	14 00
Total - Physics:		(14 cases)	(248)	(1171 44)	(5588 66)	(3290 15)	(116 88)	(10167 13)
Theoretical and Applied Mechanics								
5031	(1)	1-17-62	0	0	20 00	0	0	20 00
Total - Theoretical and Applied Mechanics:		(1 case)	(0)	(0)	(20 00)	(0)	(0)	(20 00)
TOTAL - ENGINEERING:		(33 cases)	(300)	(1332 15)	(5880 31)	(4847 65)	(116 88)	(12176 99)

* Case reported previously. # Case pending.

Champaign-Urbana
Commerce and Business Administration

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Administration								
5033	(2)	12-14-61	0	0	20 00	0	0	20 00
5141	(2)#	4-14-62	3	0	58 00	0	0	58 00
Total - Administration:	(2 cases)		(3)	(0)	(78 00)	(0)	(0)	(78 00)
Economics								
4901	(1)	9-27-61	1	0	3 00	0	0	3 00
4968	(2)	7-20-61	0	0	15 00	0	0	15 00
Total - Economics:	(2 cases)		(1)	(0)	(18 00)	(0)	(0)	(18 00)
TOTAL - COMMERCE AND BUSINESS ADMINISTRATION:	(4 cases)		(4)	(0)	(96 00)	(0)	(0)	(96 00)

* Case reported previously. # Case pending.

Champaign-Urbana
Graduate College

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Administration								
4785	(2)	4-26-61	0	0	46 70	0	0	46 70
Total - Administration:	(1 case)		(0)	(0)	(46 70)	(0)	(0)	(46 70)
Digital Computer Laboratory								
4904	(5)	9-21-61	0	0	15 00	0	0	15 00
Total - Digital Computer Laboratory:	(1 case)		(0)	(0)	(15 00)	(0)	(0)	(15 00)
Radiocarbon Laboratory								
4841	(3)	6-3-61	0	0	4 50	0	0	4 50
Total - Radiocarbon Laboratory:	(1 case)		(0)	(0)	(4 50)	(0)	(0)	(4 50)
TOTAL - GRADUATE COLLEGE:	(3 cases)		(0)	(0)	(66 20)	(0)	(0)	(66 20)

* Case reported previously. # Case pending.

Champaign-Urbana
Education

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
University High School								
5150	(1)#	4-30-62	6	0	54 25	0	0	54 25
Total - University High School:		(1 case)	(6)	(0)	(54 25)	(0)	(0)	(54 25)
TOTAL - EDUCATION:		(1 case)	(6)	(0)	(54 25)	(0)	(0)	(54 25)

* Case reported previously. # Case pending.

Champaign-Urbana
Physical Education

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Physical Education for Men								
4881	(2)	5-25-61	0	0	20 00	0	0	20 00
4896	(2)	8-7-61	19	89 14	89 05	0	0	178 19
Total - Physical Education for Men: (2 cases)			(19)	(89 14)	(109 05)	(0)	(0)	(198 19)
Physical Education for Women								
5075	(2)#	11-9-61	0	0	52 00	0	0	52 00
5079	(2)	2-10-62	0	0	4 00	0	0	4 00
Total - Physical Education for Women: (2 cases)			(0)	(0)	(56 00)	(0)	(0)	(56 00)
TOTAL - PHYSICAL EDUCATION: (4 cases)			(19)	(89 14)	(165 05)	(0)	(0)	(254 19)

* Case reported previously. # Case pending.

Champaign-Urbana
Veterinary Medicine

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
4727	(1)*	3-18-61	0	0	13 00	0	0	13 00
4825	(1)	6-14-61	0	0	15 00	0	0	15 00
4887	(1)	7-12-61	0	0	3 00	0	0	3 00
4906	(5)	8-29-61	0	0	6 00	0	0	6 00
4909	(1)	7-19-61	0	0	10 00	0	0	10 00
4985	(1)	11-15-61	0	0	18 00	0	0	18 00
5111	(1)	3-13-62	0	0	10 00	0	0	10 00
TOTAL - VETERINARY MEDICINE: (7 cases)			(0)	(0)	(75 00)	(0)	(0)	(75 00)

* Case reported previously. # Case pending.

Champaign-Urbana
Communications

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Print Shop								
4990	(1)	10-25-61	0	0	6 00	0	0	6 00
Total - Print Shop:	(1 case)		(0)	(0)	(6 00)	(0)	(0)	(6 00)
Radio Station								
5018	(2)	12-2-61	0	0	3 00	0	0	3 00
Total - Radio Station:	(1 case)		(0)	(0)	(3 00)	(0)	(0)	(3 00)
Television and Motion Pictures								
4795	(2)	5-27-61	0	0	115 99	0	0	115 99
Total - Television and Motion Pictures:	(1 case)		(0)	(0)	(115 99)	(0)	(0)	(115 99)
University Press								
4793	(1)	4-26-61	0	0	30 00	0	0	30 00
4885	(2)	7-20-61	0	0	90 18	0	0	90 18
Total - University Press:	(2 cases)		(0)	(0)	(120 18)	(0)	(0)	(120 18)
TOTAL-COMMUNICATIONS:	(5 cases)		(0)	(0)	(245 17)	(0)	(0)	(245 17)

* Case reported previously. # Case pending.

Champaign-Urbana
University Extension

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Firemanship Training								
4808	(8)	6-1-61	32	205 71	550 35	2700 00	0	3456 06
Total - Firemanship Training:	(1 case)		(32)	(205 71)	(550 35)	(2700 00)	(0)	(3456 06)
Robert Allerton House								
4961	(3)	10-28-61	0	0	19 00	0	0	19 00
Total - Robert Allerton House:	(1 case)		(0)	(0)	(19 00)	(0)	(0)	(19 00)
TOTAL - UNIVERSITY EXTENSION:	(2 cases)		(32)	(205 71)	(569 35)	(2700 00)	(0)	(3475 06)

* Case reported previously. # Case Pending.

Champaign-Urbana
Institute of Aviation

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
4884	(5)	8-15-61	0	0	26 00	0	0	26 00
4954	(1)	10-15-61	0	0	5 00	0	0	5 00
5061	(1)	2-3-62	3	0	6 25	0	0	6 25
5064	(12)#	2-9-62	0	0	5 00	0	0	5 00
5084	(2)	3-5-62	8	8 71	20 00	0	0	28 71
5094	(6)	2-28-62	0	0	6 00	0	0	6 00
TOTAL - INSTITUTE OF AVIATION:	(6 cases)		(11)	(8 71)	(68 25)	(0)	(0)	(76 96)

* Case reported previously. # Case pending.

Champaign-Urbana
Library

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
4871	(1)	8-23-61	0	0	35 00	0	0	35 00
4976	(1)	10-3-61	0	0	18 00	0	0	18 00
5030	(2)#	1-19-62	0	0	139 25	0	0	139 25
5147	(6)	1-25-62	0	0	9 00	0	0	9 00
TOTAL - LIBRARY:	(4 cases)		(0)	(0)	(201 25)	(0)	(0)	(201 25)

* Case reported previously. # Case pending.

Champaign-Urbana

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
State Natural History Survey								
4842	(1)	6-22-61	0	0	5 25	0	0	5 25
TOTAL - STATE NATURAL HISTORY SURVEY: (1 case)			(0)	(0)	(5 25)	(0)	(0)	(5 25)
State Water Survey								
4883	(11)	7-13-61	0	0	7 30	0	0	7 30
5153	(2)	4-18-62	0	0	23 07	0	0	23 07
TOTAL - STATE WATER SURVEY: (2 cases)			(0)	(0)	(30 37)	(0)	(0)	(30 37)

* Case reported previously. # Case pending.

Champaign-Urbana
Physical Plant

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
4102	(2)*	3-11-59	0	0	243 50	2000 00	0	2243 50
4294	(1)*	10-12-59	0	0	0	216 00	0	216 00
4380	(2)*	8-11-59	0	0	181 00	1000 00	0	1181 00
4384	(2)*#	3-8-60	100	685 71	1126 27	0	0	1811 98
4422	(2)*	4-6-60	0	0	23 50	62 50	0	86 00
4482	(2)*	6-9-60	0	0	20 00	3000 00	0	3020 00
4518	(2)*	8-9-60	0	0	6 00	1081 00	0	1087 00
4558	(1&2)*	9-19-60	0	0	115 00	8124 00	0	8239 00
4709	(2)*	3-2-61	0	0	12 00	0	0	12 00
4740	(2)*	3-30-61	0	0	0	81 00	0	81 00
4741	(1)*	2-24-61	0	0	46 00	225 00	0	271 00
4776	(1)	1-31-61	1	0	27 00	0	0	27 00
4782	(1)#	5-4-61	6	0	73 05	0	0	73 05
4784	(2)	5-8-61	13	39 43	22 95	0	0	62 38
4796	(2)	6-1-61	0	0	27 00	0	0	27 00
4807	(1&2)	6-8-61	31	212 57	15 00	0	0	227 57
4814	(6)	6-12-61	0	0	3 00	0	0	3 00

* Case reported previously. # Case pending.

Champaign-Urbana
Physical Plant (continued)

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
4817	(2)	6-21-61	53	340 72	612 65	450 00	0	1403 37
4827	(2)	6-26-61	0	0	17 40	0	0	17 40
4830	(2)	6-27-61	0	0	34 00	0	0	34 00
4831	(2)#	7-10-61	288	2207 84	1106 46	0	0	3314 30
4836	(2)	7-25-61	0	0	15 00	0	0	15 00
4844	(1)	7-7-61	0	0	6 00	0	0	6 00
4853	(6)	7-3-61	13	52 29	42 50	0	0	94 79
4856	(1)	8-10-61	0	0	19 00	0	0	19 00
4857	(1)	8-10-61	0	0	15 00	0	0	15 00
4859	(2)	8-7-61	8	8 71	17 80	0	0	26 51
4862	(2)#	8-18-61	51	378 86	0	0	0	378 86
4866	(6)	7-18-61	0	0	5 00	0	0	5 00
4868	(2)	8-22-61	5	0	38 55	0	0	38 55
4878	(1)	7-16-61	0	0	15 00	0	0	15 00
4879	(1)	8-16-61	3	0	10 00	0	0	10 00
4880	(5)	6-1-61	0	0	6 50	0	0	6 50
4888	(2)	8-15-61	1	0	9 00	0	0	9 00
4891	(2)	9-14-61	0	0	18 00	0	0	18 00

* Case reported previously. # Case pending.

Champaign-Urbana
Physical Plant (continued)

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
4899	(2)	8-22-61	4	0	12 50	0	0	12 50
4903	(1)	1-6-61	0	0	6 25	0	0	6 25
4910	(1)	8-15-61	0	0	18 50	0	0	18 50
4923	(5)	10-12-61	0	0	11 35	0	0	11 35
4928	(1)	9-25-61	0	0	6 50	0	0	6 50
4930	(1)	10-12-61	3	0	4 00	0	0	4 00
4937	(1)	9-20-61	0	0	6 00	0	0	6 00
4939	(2)	10-16-61	6	0	25 00	0	0	25 00
4940	(2)	10-20-61	0	0	17 95	0	0	17 95
4942	(2)	9-29-61	0	0	39 60	0	0	39 60
4943	(5)	10-4-61	0	0	3 46	0	0	3 46
4945	(2)	9-16-61	3	0	18 00	0	0	18 00
4946	(2)	10-26-61	0	0	18 00	0	0	18 00
4948	(1)	10-30-61	5	0	23 95	0	0	23 95
4949	(2)	11-3-61	3	0	45 15	0	0	45 15
4964	(1)	10-27-61	11	30 29	61 60	0	0	91 89
4965	(2)	10-20-61	6	0	18 50	0	0	18 50

* Case reported previously. # Case pending.

Champaign-Urbana
Physical Plant (continued)

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
4966	(2)	11-20-61	2	0	29 00	0	0	29 00
4969	(2)	11-17-61	0	0	3 75	0	0	3 75
4971	(2)	11-7-61	0	0	3 00	0	0	3 00
4972	(2)#	11-20-61	169	1388 21	379 50	0	0	1767 71
4977	(5)	9-28-61	0	0	15 30	0	0	15 30
4982	(2)#	12-9-61	32	262 85	223 90	0	0	486 75
4984	(2)	12-19-61	0	0	17 50	0	0	17 50
4994	(1)	12-1-61	0	0	3 00	0	0	3 00
4996	(1)	12-10-61	0	0	5 00	0	0	5 00
4997	(1)	12-8-61	0	0	5 00	0	0	5 00
4999	(1)	12-8-61	0	0	3 00	0	0	3 00
5001	(2)#	11-2-61	0	0	20 00	0	0	20 00
5004	(1)	12-20-61	0	0	5 00	0	0	5 00
5005	(2)	12-19-61	0	0	3 50	0	0	3 50
5006	(1)	12-26-61	0	0	3 00	0	0	3 00
5008	(2)	1-2-62	33	271 07	29 54	0	0	300 61
5010	(2)	12-24-61	4	0	6 00	0	0	6 00
5011	(2)	12-20-61	1	0	20 00	0	0	20 00

* Case reported previously. # Case pending.

Champaign-Urbana
Physical Plant (continued)

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
5012	(2)	12-5-61	4	0	27 00	0	0	27 00
5016	(5)	12-6-61	1	0	30 80	0	0	30 80
5020	(2)	1-15-62	1	0	4 50	0	0	4 50
5021	(1)	1-12-62	0	0	3 00	0	0	3 00
5032	(2)	1-10-62	4	0	6 00	0	0	6 00
5034	(1)	1-16-62	0	0	10 35	0	0	10 35
5040	(2)	1-19-62	0	0	48 00	0	0	48 00
5041	(2)#	1-16-62	145	1077 16	50 00	0	0	1127 16
5046	(1)	1-22-62	0	0	3 00	0	0	3 00
5047	(1)	1-22-62	0	0	3 00	0	0	3 00
5048	(5)	1-11-62	3	0	18 50	0	0	18 50
5063	(5)	2-5-62	1	0	15 00	0	0	15 00
5068	(2)#	1-25-62	0	0	31 15	0	0	31 15
5072	(1)	2-16-62	0	0	5 00	0	0	5 00
5073	(2)	2-20-62	0	0	3 00	0	0	3 00
5074	(6)	1-30-62	1	0	10 00	0	0	10 00
5077	(2)#	12-20-61	1	0	18 00	0	0	18 00
5078	(6)	4-27-61	0	0	39 25	0	0	39 25

* Case reported previously. # Case pending.

Champaign-Urbana
Physical Plant (continued)

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
5086	(2)	2-27-62	0	0	21 00	0	0	21 00
5088	(1)	2-27-62	0	0	3 00	0	0	3 00
5093	(9)	3-1-62	40	0	0	510 00	0	510 00
5096	(3)	3-7-62	0	0	5 00	0	0	5 00
5097	(2)	3-19-62	0	0	15 00	0	0	15 00
5099	(5)	2-15-62	3	0	3 70	0	0	3 70
5113	(1)	3-22-62	0	0	5 00	0	0	5 00
5114	(5)	3-23-62	0	0	3 50	0	0	3 50
5116	(11)#	12-28-61	7	0	20 82	0	0	20 82
5117	(2)#	2-22-62	0	0	5 15	0	0	5 15
5120	(2)	3-26-62	13	45 43	47 48	0	0	92 91
5122	(1)	4-6-62	0	0	1 51	0	0	1 51
5124	(2)	4-4-62	1	0	3 00	0	0	3 00
5126	(1)	4-6-62	0	0	3 00	0	0	3 00
5128	(9)#	4-6-62	25	185 71	408 00	0	0	593 71
5129	(1)#	4-6-62	9	15 14	26 75	0	0	41 89
5132	(1)	4-4-62	0	0	10 00	0	0	10 00
5134	(1)	4-12-62	0	0	3 00	0	0	3 00

* Case reported previously. # Case pending.

Champiagn-Urbana
Physical Plant (continued)

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
5135	(2)	4-6-62	0	0	10 00	0	0	10 00
5139	(1)	4-16-62	0	0	5 50	0	0	5 50
5140	(1)	4-16-62	0	0	6 00	0	0	6 00
5142	(1)	4-16-62	6	0	49 71	0	0	49 71
5143	(2)#	3-30-62	29	215 43	38 00	0	0	253 43
5154	(2)#	4-29-62	13	52 29	32 10	0	0	84 39
5156	(1)	4-27-62	0	0	10 00	0	0	10 00
5160	(1)	5-15-62	1	0	5 50	0	0	5 50
5161	(1)	5-15-62	0	0	5 00	0	0	5 00
5170	(5)	4-17-62	0	0	16 00	0	0	16 00
5173	(1)#	3-20-62	0	0	10 00	0	0	10 00
5175	(5)	5-4-62	0	0	17 00	0	0	17 00
5176	(2)	4-19-62	6	0	10 00	0	0	10 00
TOTAL - PHYSICAL PLANT: (119 cases)			(1169)	(7469 71)	(6165 70)	(16749 50)	(0)	(30384 91)

* Case reported previously. # Case pending.

Champaign-Urbana
Physical Plant-Auxiliary Enterprises

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Illini Union								
4756	(1)*	3-7-61	0	0	21 00	0	0	21 00
4777	(2)	4-20-61	4	0	33 00	0	0	33 00
4794	(1)	5-16-61	12	32 14	53 00	0	0	85 14
4797	(2)	5-27-61	10	19 29	50 40	0	0	69 69
4812	(2)	6-4-61	3	0	48 00	0	0	48 00
4816	(1)	5-31-61	0	0	3 00	0	0	3 00
4826	(2)	6-13-61	4	0	32 85	0	0	32 85
4838	(1)	7-10-61	0	0	9 30	0	0	9 30
4839	(3)	6-26-61	0	0	3 50	0	0	3 50
4849	(1)	7-30-61	0	0	3 00	0	0	3 00
4851	(3)#	7-1-61	67	430 71	157 80	0	0	588 51
4907	(1)	9-16-61	0	0	6 00	0	0	6 00
4932	(3)	10-3-61	0	0	3 00	0	0	3 00
4951	(2)	10-19-61	0	0	25 00	0	0	25 00
4962	(3)#	11-1-61	48	377 14	137 10	0	0	514 24
4988	(2)	11-21-61	1	0	41 00	0	0	41 00
4992	(1)	11-25-61	0	0	10 00	0	0	10 00

* Case reported previously. # Case pending.

Champaign-Urbana
Physical Plant-Auxiliary Enterprises (continued)

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Illini Union (continued)								
5019	(2)	12-29-61	10	22 71	20 75	0	0	43 46
5042	(1)	1-12-62	0	0	71 00	0	0	71 00
5056	(2)	1-18-62	0	0	10 00	0	0	10 00
5057	(1)	1-10-62	4	0	1 55	0	0	1 55
5060	(11)#	12-15-61	0	0	28 00	0	0	28 00
5062	(1)	1-19-62	10	24 64	0	0	0	24 64
5065	(1)#	1-6-62	0	0	15 00	0	0	15 00
5090	(1)	2-22-62	0	0	6 00	0	0	6 00
5107	(1)	3-3-62	10	21 86	20 00	0	0	41 86
5108	(2)	3-15-62	7	0	3 50	0	0	3 50
5112	(1)	3-9-62	1	0	15 00	0	0	15 00
5118	(2)	3-31-62	0	0	29 02	0	0	29 02
5130	(2)#	4-9-62	0	0	41 70	0	0	41 70
5136	(3)	4-9-62	0	0	3 50	0	0	3 50
5157	(1)	4-29-62	0	0	5 00	0	0	5 00
Total - Illini Union:	(32 cases)		(191)	(928 97)	(906 97)	(0)	(0)	(1835 46)

* Case reported previously. # Case pending.

Champaign-Urbana
Physical Plant-Auxiliary Enterprises (continued)

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Housing Division								
4597	(1)*	10-22-60	0	0	18 00	0	0	18 00
4672	(2)*	1-5-61	0	0	25 50	0	0	25 50
4687	(2)*	1-26-61	0	0	39 65	0	0	39 65
4712	(2)*	2-24-61	0	0	373 65	0	0	373 65
4758	(1)*	3-15-61	0	0	0	90 00	0	90 00
4763	(1)*	3-7-61	0	0	0	175 00	0	175 00
4792	(2)	5-13-61	0	0	24 00	0	0	24 00
4811	(2)	6-16-61	0	0	47 60	0	0	47 60
4813	(1)	6-11-61	0	0	15 00	0	0	15 00
4821	(1)	6-13-61	0	0	15 00	0	0	15 00
4824	(1)	6-14-61	0	0	8 00	0	0	8 00
4829	(1)	7-4-61	0	0	30 00	0	0	30 00
4833	(2)	6-13-61	110	707 15	282 85	528 75	0	1518 75
4837	(2)	6-20-61	0	0	6 00	0	0	6 00
4840	(2)#	7-6-61	0	0	6 00	0	0	6 00
4845	(2)	6-30-61	0	0	3 00	0	0	3 00
4846	(2)	6-8-61	0	0	10 00	0	0	10 00

* Case reported previously. # Case pending.

Champaign-Urbana
Physical Plant-Auxiliary Enterprises (continued)

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Housing Division (continued)								
4850	(1)	8-7-61	0	0	3 00	0	0	3 00
4854	(1)	8-8-61	33	245 14	302 40	0	0	547 54
4863	(1)	8-14-61	1	0	34 35	0	0	34 35
4864	(6)	8-21-61	0	0	10 00	0	0	10 00
4890	(5)	9-9-61	0	0	6 00	0	0	6 00
4892	(1)	9-10-61	0	0	15 00	0	0	15 00
4893	(3)	9-13-61	0	0	3 00	0	0	3 00
4905	(1)	9-28-61	0	0	3 00	0	0	3 00
4915	(2)	8-29-61	0	0	10 00	0	0	10 00
4916	(1)	9-16-61	0	0	5 00	0	0	5 00
4917	(1)	9-18-61	0	0	18 00	0	0	18 00
4918	(2)	9-20-61	5	0	71 30	0	0	71 30
4919	(1)	9-21-61	22	163 43	79 94	0	0	243 37
4920	(1)	9-28-61	5	0	40 00	0	0	40 00
4926	(2)#	10-2-61	12	41 07	44 73	0	0	85 80
4929	(3)	9-23-61	0	0	3 00	0	0	3 00
4931	(2)	10-7-61	0	0	20 00	0	0	20 00

* Case reported previously. # Case pending.

Champaign-Urbana
Physical Plant-Auxiliary Enterprises (continued)

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Housing Division (continued)								
4933	(1)	10-14-61	0	0	3 00	0	0	3 00
4934	(1)	9-24-61	0	0	3 00	0	0	3 00
4938	(1)	10-13-61	0	0	6 00	0	0	6 00
4944	(1)	10-13-61	9	14 57	0	0	0	14 57
4947	(1)	10-23-61	0	0	4 55	0	0	4 55
4955	(1)	11-3-61	0	0	5 00	0	0	5 00
4956	(3)	11-4-61	0	0	3 50	0	0	3 50
4960	(3)	11-10-61	0	0	3 50	0	0	3 50
4970	(3)	11-19-61	0	0	3 00	0	0	3 00
4980	(2)	12-5-61	28	220 00	0	220 00	0	440 00
4987	(5)	11-29-& 11-30-61	2	0	6 15	0	0	6 15
4991	(1)	11-27-61	2	0	10 00	0	0	10 00
4995	(3)	12-1-61	0	0	4 50	0	0	4 50
4998	(3)#	12-8-61	0	0	3 00	0	0	3 00
5000	(1)	12-17-61	0	0	3 00	0	0	3 00
5002	(12)	12-14-61	0	0	96 00	0	0	96 00
5013	(1)#	1-2-62	0	0	20 00	0	0	20 00

* Case reported previously. # Case pending.

Champaign-Urbana
Physical Plant-Auxiliary Enterprises (continued)

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Housing Division (continued)								
5022	(2)	1-9-62	2	0	16 75	0	0	16 75
5036	(1)	1-21-62	0	0	8 00	0	0	8 00
5043	(1)	1-22-62	17	75 71	54 00	0	0	129 71
5051	(3)	11-30-61	7	0	20 00	0	0	20 00
5080	(5)	2-26-62	0	0	2 69	0	0	2 69
5083	(2)	3-5-62	1	0	59 15	0	0	59 15
5087	(1)	2-25-62	0	0	3 00	0	0	3 00
5089	(1)	3-8-62	0	0	3 50	0	0	3 50
5101	(1)	3-15-62	0	0	18 00	0	0	18 00
5103	(1)	2-23-62	0	0	40 00	0	0	40 00
5115	(1)	3-12-62	6	0	82 30	0	0	82 30
5119	(1)	3-25-62	6	0	92 75	0	0	92 75
5125	(5)	4-8-62	0	0	3 00	0	0	3 00
5131	(2)	3-5-62	3	0	35 00	0	0	35 00
5146	(1)	4-3-62	0	0	25 00	0	0	25 00
5149	(1)	4-26-62	0	0	8 00	0	0	8 00
5158	(1)	5-2-62	0	0	6 00	0	0	6 00

* Case reported previously. # Case pending.

Champaign-Urbana
Physical Plant-Auxiliary Enterprises (continued)

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Housing Division (continued)								
5159	(3)	5-16-62	0	0	5 25	0	0	5 25
5164	(1)	5-15-62	0	0	8 25	0	0	8 25
5165	(2)	5-12-62	0	0	3 00	0	0	3 00
5171	(1)	4-23-62	0	0	10 00	0	0	10 00
5172	(3)	3-20-62	0	0	16 35	0	0	16 35
5177	(1)	4-30-62	0	0	5 40	0	0	5 40
Total - Housing Division: (74 cases)			(271)	(1467 07)	(2272 56)	(1013 75)	(0)	(4753 38)
TOTAL - Physical Plant-Auxiliary Enterprises: (106 cases)			(462)	(2395 56)	(3179 53)	(1013 75)	(0)	(6588 84)
TOTAL - PHYSICAL PLANT: (225 cases)			(1631)	(9865 27)	(9345 23)	(17763 25)	(0)	(36973 75)
TOTAL - CHAMPAIGN-URBANA: (367 cases)			(2394)	(13599 19)	(22464 96)	(29347 90)	(116 88)	(65528 93)

* Case reported previously. # Case pending.

CHICAGO PROFESSIONAL COLLEGES

Chicago Professional Colleges
Aeromedical Laboratory

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
C-544	(11)	7-27-61	0	0	52	0	0	52
TOTAL - AEROMEDICAL LABORATORY: (1 case)			(0)	(0)	(52)	(0)	(0)	(52)

* Case reported previously. # Case pending.

Chicago Professional Colleges
College of Dentistry

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Dental Administration								
C-583	(2)	4-23-62	0	0	5 37	0	0	5 37
Total - Dental Administration: (1 case)			(0)	(0)	(5 37)	(0)	(0)	(5 37)
Dental Orthodontics								
C-580	(5)	2-8-62	0	0	55	0	0	55
Total- Dental Orthodontics: (1 case)			(0)	(0)	(55)	(0)	(0)	(55)
TOTAL - COLLEGE OF DENTISTRY: (2 cases)			(0)	(0)	(5 92)	(0)	(0)	(5 92)

* Case reported previously. # Case pending.

Chicago Professional Colleges
College of Medicine

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Biological Chemistry								
C-548	(3)	9-8-61	0	0	66	0	0	66
C-554	(3)	3-29-61	0	0	87	0	0	87
Total - Biological Chemistry: (2 cases)			(0)	(0)	(1 53)	(0)	(0)	(1 53)
Pathology								
C-529	(12)	5-28-61	25	160 71	0	0	0	160 71
Total - Pathology: (1 case)			(25)	(160 71)	(0)	(0)	(0)	(160 71)
Pediatrics								
C-551	(12)	10-3-61	0	0	28 68	0	0	28 68
Total - Pediatrics: (1 case)			(0)	(0)	(28 68)	(0)	(0)	(28 68)
Physiology								
C-547	(5)	10-24-61	0	0	1 99	0	0	1 99
C-582	(2)#	4-11-62	0	0	1 45	0	0	1 45
Total - Physiology: (2 cases)			(0)	(0)	(3 44)	(0)	(0)	(3 44)

* Case reported previously. # Case pending.

Chicago Professional Colleges
College of Medicine (continued)

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Psychiatry								
C-581	(1)	2-27-62	0	0	4 17	0	0	4 17
Total - Psychiatry:	(1 case)		(0)	(0)	(4 17)	(0)	(0)	(4 17)
Radiology								
C-526	(3)	5-29-61	26	167 14	1 19	0	0	168 33
C-542	(1)	9-7-61	0	0	50	0	0	50
C-565	(3)	11-9& 11-16-61	0	0	3 19	0	0	3 19
Total - Radiology:	(3 cases)		(26)	(167 14)	(4 88)	(0)	(0)	(172 02)
Surgery								
C-499	(1)*	10-21-60	0	0	35 00	1368 00	0	1403 00
C-517	(4)	5-17-61	2	0	5 28	0	0	5 28
C-535	(3)	8-9-61	0	0	1 44	0	0	1 44
C-572	(2)	2-6-62	8	7 86	6 24	0	0	14 10
Total - Surgery:	(4 cases)		(10)	(7 86)	(47 96)	(1368 00)	(0)	(1423 82)
TOTAL - COLLEGE OF MEDICINE:	(14 cases)		(61)	(335 71)	(90 66)	(1368 00)	(0)	(1794 37)

* Case reported previously. # Case pending.

Chicago Professional Colleges
College of Pharmacy

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
C-531	(2)	7-27-61	0	0	10	0	0	10
TOTAL - COLLEGE OF PHARMACY: (1 case)			(0)	(0)	(10)	(0)	(0)	(10)
Illinois Eye and Ear Infirmary								
C-545	(2)	9-20-61	0	0	7 37	0	0	7 37
TOTAL - ILLINOIS EYE AND EAR INFIRMARY: (1 case)			(0)	(0)	(7 37)	(0)	(0)	(7 37)

* Case reported previously. # Case pending.

Chicago Professional Colleges
Research and Educational Hospitals

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Dietary								
C-525	(1)	7-8-61	12	36 43	0	0	0	36 43
C-577	(2)	2-25-62	13	43 71	0	0	0	43 71
C-579	(2)	3-5-62	0	0	1 59	0	0	1 59
Total - Dietary:	(3 cases)		(25)	(80 14)	(1 59)	(0)	(0)	(81 73)
Medical Records								
C-585	(1)#	7-17-61	0	0	8 50	0	0	8 50
Total -Medical Records:	(1 case)		(0)	(0)	(8 50)	(0)	(0)	(8 50)
Nursing								
C-429	(2)*	7-3-59	0	0	40 00	1200 00	0	1240 00
C-469	(2)*	6-14-60	0	0	125 00	2610 00	0	2735 00
C-506	(2)*	3-20-61	0	0	19 50	0	0	19 50
C-518	(1)	5-1-61	0	0	96	0	0	96
C-521	(2)	5-6-61	3	0	36	0	0	36
C-522	(2)	6-10-61	0	0	66	0	0	66
C-523	(1)	5-30-61	0	0	4 52	0	0	4 52
C-527	(12)	5-8-61	97	623 57	84	0	0	624 41

* Case reported previously. # Case pending.

Chicago Professional Colleges
Research and Educational Hospitals (continued)

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Nursing (continued)								
C-528	(2)	6-18-61	23	167 57	38 75	0	0	206 32
C-536	(2)	8-25-61	0	0	89	0	0	89
C-541	(1)	9-17-61	7	0	5 94	0	0	5 94
C-549	(1)	10-11-61	0	0	29	0	0	29
C-552	(1)#	11-14-61	19	90 86	847 34	0	0	938 20
C-556	(2)	11-9-61	0	0	3 80	0	0	3 80
C-562	(2)	12-8-61	0	0	4 46	0	0	4 46
C-571	(2)	2-19-62	10	22 71	1 85	0	0	24 56
Total - Nursing:	(16 cases)		(159)	(904 71)	(1095 16)	(3810 00)	(0)	(5809 87)
Physical Medicine and Rehabilitation								
C-519	(12)	4-15-61	0	0	50	0	0	50
Total - Physical Medicine and Rehabilitation:	(1 case)		(0)	(0)	(50)	(0)	(0)	(50)
TOTAL - RESEARCH AND EDUCATIONAL HOSPITALS:	(21 cases)		(184)	(984 85)	(1105 75)	(3810 00)	(0)	(5900 60)

* Case reported previously. # Case pending.

Chicago Professional Colleges
Physical Plant

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
C-490	(2)*	11-28-60	0	0	40 00	1380 00	0	1420 00
C-515	(2)	7-17-61	20	106 79	3 81	0	0	110 60
C-516	(2)	6-30-61	1	0	48 05	0	24 75	72 80
C-520	(1)	5-26-61	0	0	1 42	0	0	1 42
C-532	(2)	8-2-61	5	0	18	0	0	18
C-534	(2)	7-12-61	48	356 57	0	0	0	356 57
C-537	(1)#	7-20-61	11	30 29	35	0	0	30 64
C-538	(2)	8-31-61	11	32 86	0	0	0	32 86
C-539	(2)#	9-15-61	233	1730 86	134 23	0	0	1865 09
C-543	(2)	8-10-61	4	0	2 85	0	0	2 85
C-546	(2)	10-23-61	9	14 57	89	0	0	15 46
C-550	(1)	10-31-61	12	37 14	3 60	0	0	40 74
C-555	(1)	10-29-61	12	39 29	0	0	0	39 29
C-557	(2)	12-6-61	0	0	5 75	0	0	5 75
C-564	(11)#	12-8-61	9	17 43	0	0	0	17 43
C-566	(1)	3-9-61	0	0	0	180 00	0	180 00
C-567	(2)#	1-8-62	0	0	1 39	0	0	1 39
C568	(1)	1-18-62	0	0	77	0	0	77

* Case reported previously. # Case pending.

Chicago Professional Colleges
Physical Plant (continued)

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
C-569	(1)	12-19-61	0	0	2 45	0	0	2 45
C-574	(1)	2-7-62	0	0	7 68	0	0	7 68
C-586	(2)#	5-21-62	12	37 86	2 33	0	0	40 19
TOTAL - PHYSICAL PLANT:	(21 cases)		(387)	(2403 66)	(255 75)	(1560 00)	(24 75)	(4244 16)
TOTAL - CHICAGO PROFESSIONAL COLLEGES:	(61 cases)		(632)	(3724 22)	(1466 07)	(6738 00)	(24 75)	(11953 04)

* Case reported previously. # Case pending.

CHICAGO UNDERGRADUATE DIVISION

Chicago Undergraduate Division
Engineering

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Mechanical Engineering								
C-530	(5)	7-27-61	1	0	20 00	0	0	20 00
Total - Mechanical Engineering: (1 case)			(1)	(0)	(20 00)	(0)	(0)	(20 00)
TOTAL - ENGINEERING:		(1 case)	(1)	(0)	(20 00)	(0)	(0)	(20 00)

* Case reported previously. # Case pending.

Chicago Undergraduate Division
Liberal Arts and Sciences

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
Social Sciences								
C-563	(2)	12-2-61	0	0	10 00	0	0	10 00
Total - Social Sciences: (1 case)			(0)	(0)	(10 00)	(0)	(0)	(10 00)
TOTAL - LIBERAL ARTS AND SCIENCES: (1 case)			(0)	(0)	(10 00)	(0)	(0)	(10 00)

* Case reported previously. # Case pending.

Chicago Undergraduate Division
Physical Plant

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
C-524	(1)	7-1-61	0	0	3 00	0	0	3 00
C-533	(4)	8-3-61	1	0	6 25	0	0	6 25
C-540	(2)	10-4-61	41	310 43	184 00	0	0	494 43
C-561	(5)	12-8-61	0	0	11 75	0	0	11 75
C-575	(2)#	3-1-62	59	438 29	117 00	0	0	555 29
C-576	(2)	2-22-62	45	327 86	0	0	3 15	331 01
TOTAL - PHYSICAL PLANT: (6 cases)			(146)	(1076 58)	(322 00)	(0)	(3 15)	(1401 73)
TOTAL - CHICAGO UNDERGRADUATE DIVISION: (8 cases)			(147)	(1076 58)	(352 00)	(0)	(3 15)	(1431 73)

* Case reported previously. # Case pending.

DIVISION OF SERVICES FOR CRIPPLED CHILDREN

Division of Services for
Crippled Children

Claim No.	(Type of Injury)	Date of Accident	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
4935	(3)	9-26-61	0	0	6 50	0	0	6 50
4967	(1)	11-3-61	0	0	66	0	0	66
5009	(2)#	1-3-62	17	87 14	223 95	0	0	311 09
5054	(9)	1-17-62	24	174 86	428 75	0	0	603 61
5174	(5)#	5-8-62	0	0	10 00	0	0	10 00
TOTAL - DIVISION OF SERVICES FOR CRIPPLED CHILDREN:	(5 cases)		(41)	(262 00)	(669 86)	(0)	(0)	(931 86)

* Case reported previously. # Case pending.

TOTALS

	Calendar Days Lost	Comp. Time Lost	Medical	P. Disability Final Settlement	Other Expenses	O. D. or Work Comp. Cost
TOTAL - CHAMPAIGN-URBANA: (367 cases)	(2394)	(13599 19)	(22464 96)	(29347 90)	(116 88)	(65528 93)
TOTAL - CHICAGO PROFESSIONAL COLLEGES: (61 cases)	(632)	(3724 22)	(1466 07)	(6738 00)	(24 75)	(11953 04)
TOTAL - CHICAGO UNDERGRADUATE DIVISION: (8 cases)	(147)	(1076 58)	(352 00)	(0)	(3 15)	(1431 73)
TOTAL - DIVISION OF SERVICES FOR CRIPPLED CHILDREN: (5 cases)	(41)	(262 00)	(669 86)	(0)	(0)	(931 86)
GRAND TOTAL (441 cases)	(3214)	(18661 99)	(24952 89)	(36085 90)	(144 78)	(79845 56)

* Case reported previously. # Case pending.

SCHEDULE 2

COMMON LAW CLAIMS (PERSONAL INJURY)

Nineteen claims of this nature were considered and acted upon by The Committee on Accident Compensation. Seven were disposed of by settlement, two were settled by outside agencies, four were denied, and in one no claim was presented. Five others were considered but definite decisions were deferred pending further developments in each case, at a total cost to the University of $2268.64.

In acting upon such claims The Committee on Accident Compensation is necessarily governed by the applicable principles of Illinois Law under which the University is not liable to the claimants unless their injuries were proximately caused by negligence upon the part of the University or one of its agents or employees, and unless, even if the University was negligent in the premises, the claimant was free from negligence on his part which contributed to his injuries.

SCHEDULE 3

CASES WHERE PAYMENTS OF HOSPITAL OR MEDICAL

STATEMENTS WERE MADE ON THE BASIS OF REFERRAL

Champaign-Urbana
Cases Where Payments of Hospital or Medical Statements Were Made on the Basis of Referral

Claim No.	Injury	Date of Accident	Department	Amount Paid on The Basis of Referral
4786	(1)	3-27-61	Housing	$ 6 00
4828	(12)	7-10-61	Physical Plant	$ 6 00
4832	(2)	6-16-61	Physical Plant	$256 30
4886	(12)	7-26-61	Institute of Aviation	$ 10 00
4902	(2)	9-9-61	Animal Science	$ 39 00
4952	(2)#	10-27-61	Physical Plant	$104 40
4978	(12)	11-20-61	P.E. for Women	$132 00
5014	(12)	1-4-61	Housing	$ 20 00
5152	(11)	3-28-62	Chemistry and Chemical Engineering	$ 1 65
TOTAL - CHAMPAIGN-URBANA: (9 cases)				($575 35)

* Case reported previously. # Case pending.

Chicago Undergraduate Division
Cases Where Payments of Hospital or Medical Statements Were Made on the Basis of Referral

Claim No.	Injury	Date of Accident	Department	Amount Paid on The Basis of Referral
C-553	(1)	10-18-61	Humanities	$ 23.00
C-570	(2)#	2-3-62	Physical Sciences	$1071 95
TOTAL - CHICAGO UNDERGRADUATE DIVISION: (2 cases)				($1094 95)
GRAND TOTAL - Cases Where Payment of Hospital or Medical Statements Were Made on the Basis of Referral: (11 cases)				($1670 30)

* Case reported previously. # Case pending.

SCHEDULE 4

ANALYSIS OF COMPENSABLE CASES

Analysis of Compensable Cases*
Number of Cases

INJURY	1958 - 59	1959 - 60	1960 - 61	1961 - 62
1. Cuts and Bruises	129	133	128	167
2. Strains, sprains and fractures	120	137	151	170
3. Burns and infections	21	21	30	35
4. Punctures	8	9	10	7
5. Particle in eye	29	20	35	31
6. Splinters	2	5	8	9
7. Inhaling toxic fumes	1	0	0	0
8. Automobile Accidents	2	0	0	1
9. Hernia	5	5	8	5
10. Diagnostic x-ray	0	0	0	0
11. Allergies	4	6	2	7
12. Other	11	6	11	9
TOTAL:	(332)	(342)	(383)	(441)

* Includes all cases listed in Schedule 1.

SCHEDULE 5

COMPARATIVE SUMMARY OF ACCIDENT CASES

BY DEPARTMENT, NUMBER, AND TOTAL COST

Champaign-Urbana
Comparative Summary of Accident Cases by Department, Number, and Total Cost

College or Department	1960 - 1961 No. of Cases	Work. Comp. or O.D. Cost	Total Cost*	1961 - 1962 No. of	Work. Comp. or O.D. Cost	Total Cost*
Administration & General	15	1,233.85	1,425.77	7	529.87	789.19
Liberal Arts and Sciences	18	4,884.39	4,933.25	13	2,481.49	2,556.69
Agriculture	53	5,278.63	6,723.66	50	8,787.13	9,717.93
Engineering	35	9,266.24	11,095.34	33	12,176.99	13,310.19
Commerce and Business Adm.	0	0	0	4	96.00	297.08
Graduate College	0	0	0	3	66.20	66.20
Education	1	35.50	35.50	1	54.25	72.45
Physical Education	7	344.59	528.09	4	254.19	441.48
Veterinary Medicine	4	31.90	31.90	7	75.00	75.00
Communications	2	23.00	23.00	5	245.17	245.17
University Extension	6	79.75	79.75	2	3,475.06	3,927.68
Institute of Aviation	4	64.85	64.85	6	76.96	262.05
Library	2	26.40	26.40	4	201.25	201.25
State Natural History Survey	0	0	0	1	5.25	5.25
State Water Survey	1	37.00	75.25	2	30.37	30.37
Physical Plant	104	31,927.34	40,298.83	119	30,384.91	37,110.19
Illini Union	20	1,787.11	2,450.49	32	1,835.46	2,512.41

Champaign-Urbana
Comparative Summary of Accident Cases by Department, Number, and Total Cost

College or Department	No. of Cases	1960 - 1961 Work. Comp. or O.D. Cost	Total Cost*	No. of Cases	1961 - 1962 Work. Comp. or O.D. Cost	Total Cost*
Housing Division	48	2,875.58	3,757.26	74	4,753.38	5,325.50
TOTAL - CHAMPAIGN-URBANA:	(320)	(57,896.13)	(71,549.34)	(367)	(65,528.93)	(76,946.08)

* To be consistent with previous report, total cost means University Benefits plus the cost of benefits under the Workmen's Compensation or O.D. Acts.

Chicago Professional College
Comparative Summary of Accident Cases by Department, Number, and Total Cost

College or Department	1960 - 1961 No. of Cases	1960 - 1961 Work. Comp. or O.D. Cost	1960 - 1961 Total Cost*	1961 - 1962 No. of Cases	1961 - 1962 Work. Comp. or O.D. Cost	1961 - 1962 Total Cost*
Aeromedical Laboratory	0	0	0	1	.52	.52
College of Dentistry	1	.30	.30	2	5.92	5.92
College of Medicine	6	98.87	447.95	14	1,794.37	2,170.00
College of Pharmacy	0	0	0	1	.10	.10
Illinois Eye & Ear Infirmary	0	0	0	1	7.37	7.37
R & E Hospitals	25	1,687.14	2,419.59	21	5,900.60	7,421.55
Physical Plant	14	807.95	2,174.89	21	4,244.16	6,442.51
Illini Union	3	30.14	68.62	0	0	0
TOTAL - CHICAGO PROFESSIONAL COLLEGES:	(49)	(2,624.40)	(5,111.35)	(61)	(11,953.04)	(16,047.97)

* To be consistent with previous reports, total cost means University Benefits plus the cost of benefits under Workmen's Compensation or O.D. Acts.

Chicago Undergraduate Division
Comparative Summary of Accident Cases by Department, Number, and Total Cost

College or Department	1960 - 1961 No. of Cases	1960 - 1961 Work. Comp. or O.D. Cost	1960 - 1961 Total Cost*	1961 - 1962 No. of Cases	1961 - 1962 Work. Comp. or O.D. Cost	1961 - 1962 Total Cost*
Liberal Arts and Sciences	2	10.00	10.00	1	10.00	10.00
Engineering	1	31.35	31.35	1	20.00	30.50
Physical Plant	7	148.21	199.73	6	1,401.73	2,843.31
Illini Union	1	41.50	41.50	0	0	0
TOTAL - CHICAGO UNDERGRADUATE DIVISION:	(11)	(231.06)	(282.58)	(8)	(1,431.73)	(2,883.81)
DIVISION OF SERVICES FOR CRIPPLED CHILDREN:	3	75.15	75.15	5	931.86	1,123.80
GRAND TOTAL:	(383)	(60,826.74)	(77,018.42)	(441)	(79,845.56)	(97,001.66)

* To be consistent with previous reports, total cost means University Benefits plus the cost of benefits under Workmen's Compensation or O.D. Acts.

SCHEDULE 6

CASES CONSIDERED BY THE INDUSTRIAL COMMISSION OF ILLINOIS
AND DISPOSITION THEREOF

AGREED SETTLEMENTS APPROVED BY THE

INDUSTRIAL COMMISSION OF ILLINOIS

Agreed Settlement Approved by the Industrial Commission of Illinois

Case No.	Type of Injury	Date of Accident	Basis of Settlement	Amount of Settlement
4102	(2)	3-11-59	Basis of 22+% loss of use of left leg	2,000.00
4294	(1)	10-12-59	Basis of 20% loss of use of 2nd digit left foot and 20% loss of use of third digit left foot	216.00
4380	(2)	8-11-59	Basis of 10% loss of use of left lower extremity	1,000.00
4482	(2)	6-9-60	Basis of 33 1/3% loss of use of right leg	3,000.00
4518	(2)	8-9-60	Basis of 10% loss of use of right arm (15% disability less 5% paid under Settlement Contract #603238)	1,081.00
4558	(1&2)	9-19-60	Basis of 10% loss of use of left leg, 45% loss of use of left arm, 10% loss of use of right arm, and fractured nasal pyramid	8,124.00
4581	(1&5)	10-6-60	Basis of 10% loss of use of right eye plus $356 for possible future medical	1,000.00
4623	(1)	11-18-60	Basis of 10% loss of use of left upper extremity	1,057.50
4652	(2)	11-18-60	Basis of 10% loss of use of right arm	1,175.00
4743	(2)	6-13-60	Basis of 10% loss of use of both hands less amount received on public liability	243.18
4808	(8)	6-1-61	Basis of 60 weeks for fractured vertebra	2,700.00
5093	(9)	3-1-62	Compromise settlement of a questionable hernia claim	510.00
C-490	(2)	11-28-60	Basis of 15% loss of use of left leg	1,380.00

Agreed Settlements Approved by the Industrial Commission of Illinois

Case No.	Type of Injury	Date of Accident	Basis of Settlement	Amount of Settlement
C-499	(1)	10-21-60	Basis of 15% loss of use of left hand	1,368.00
C-566	(1)	3-9-61	Basis of 20% loss of use of left little finger	180.00
TOTAL - Agreed Settlements Approved by the Industrial Commission of Illinois			(15 cases)	(25,034.68)

DISPOSITION OF DISPUTED CLAIMS CONSIDERED BY THE INDUSTRIAL COMMISSION OF ILLINOIS

Disposition of Disputed Claims Considered by the Industrial Commission of Illinois

Case No.	Type of Injury	Date of Accident	Basis of Award	Amount of Award
C-429	(2)	7-3-59	Compromise settlement	1,200.00
C-469	(2)	6-14-60	Basis of 8 weeks of $45.00 for time lost plus 25% loss of use of left leg	2,610.00
TOTAL - Disposition of Disputed Claims Considered by the Industrial Commission of Illinois			(2 cases)	(3,810.00)
GRAND TOTAL -			(17 cases)	(28,844.68)

SCHEDULE 7

RELATION OF INJURY COSTS TO TOTAL ANNUAL PAYROLL

Relation of Injury Costs to Total Annual Payroll

Year	Total Annual Payroll	Amount paid by University on Injuries to Employees	Work. Comp. or O.D. Cost	Percent of Injury Costs to Total Payroll	Percent of Work. Comp. or O.D. Costs to Total Payroll
1948 - 49	25 438 883	19 327	_____	0.0760%	_____
1949 - 50	29 134 839	26 517	_____	0.0909%	_____
1950 - 51	30 470 619	17 208	_____	0.0565%	_____
1951 - 52	31 801 212	33 989	_____	0.1068%	_____
1952 - 53	35 969 804	29 373	_____	0.0816%	_____
1953 - 54	37 855 681	49 694*	38 712	0.1313%	0.1022
1954 - 55	39 303 520	38 400*	28 943	0.0977%	0.0736
1955 - 56	43 756 102	55 682*	42 581	0.127%	0.0973
1956 - 57	46 117 802	57 467*	49 261	0.1246%	0.1068
1957 - 58	49 943 732	48 499*	36 809	0.0971%	0.0737
1958 - 59	52 334 875	56 012*	40 655	0.1070%	0.0776
1959 - 60	58 393 682	69 449*	57 526	0.1189%	0.0985
1960 - 61	65 502 225	77 018*	60 826	0.1176%	0.0928
1961 - 62	71 706 875	97 001*	79 845	0.1352%	0.1113

* To be consistent with previous reports, total cost means University Benefits plus the cost of benefits under the Illinois Workmen's Compensation or O.D. Acts.

UNIVERSITY OF ILLINOIS-URBANA
3 0112 105726605